

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

09/803022

## CLAIMS AS FILED - PART I

*Amdt. filed 6/27/05*

|                                  | (Column 1)               | (Column 2)   |
|----------------------------------|--------------------------|--------------|
| TOTAL CLAIMS                     |                          |              |
| FOR                              | NUMBER FILED             | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS          | 18 minus 20 = *          | /            |
| INDEPENDENT CLAIMS               | 3 minus 3 = *            | /            |
| MULTIPLE DEPENDENT CLAIM PRESENT | <input type="checkbox"/> |              |

SMALL ENTITY TYPE  OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |    | RATE      | FEE    |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 150.00 | OR | BASIC FEE | 300.00 |
| X\$ 25=   |        | OR | X\$50=    |        |
| X100=     |        | OR | X200=     |        |
| +180=     |        | OR | +360=     |        |
| TOTAL     |        | OR | TOTAL     |        |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

|   | (Column 1)                       | (Column 2) | (Column 3)                         |               |
|---|----------------------------------|------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT |            | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | Total                            | *          | Minus                              | ** =          |
|   | Independent                      | *          | Minus                              | *** =         |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |            |                                    |               |

SMALL ENTITY OR OTHER THAN SMALL ENTITY

| RATE             | ADDI-TIONAL FEE |    | RATE             | ADDI-TIONAL FEE |
|------------------|-----------------|----|------------------|-----------------|
| X\$ 25=          |                 | OR | X\$50=           |                 |
| X100=            |                 | OR | X200=            |                 |
| +180=            |                 | OR | +360=            |                 |
| TOTAL ADDIT. FEE |                 | OR | TOTAL ADDIT. FEE |                 |

|   | (Column 1)                       | (Column 2) | (Column 3)                         |               |
|---|----------------------------------|------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT |            | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | Total                            | *          | Minus                              | ** =          |
|   | Independent                      | *          | Minus                              | *** =         |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |            |                                    |               |

| RATE             | ADDI-TIONAL FEE |    | RATE             | ADDI-TIONAL FEE |
|------------------|-----------------|----|------------------|-----------------|
| X\$ 25=          |                 | OR | X\$50=           |                 |
| X100=            |                 | OR | X200=            |                 |
| +180=            |                 | OR | +360=            |                 |
| TOTAL ADDIT. FEE |                 | OR | TOTAL ADDIT. FEE |                 |

|   | (Column 1)                       | (Column 2) | (Column 3)                         |               |
|---|----------------------------------|------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT |            | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | Total                            | *          | Minus                              | ** =          |
|   | Independent                      | *          | Minus                              | *** =         |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |            |                                    |               |

| RATE    | ADDI-TIONAL FEE |    | RATE   | ADDI-TIONAL FEE |
|---------|-----------------|----|--------|-----------------|
| X\$ 25= |                 | OR | X\$50= |                 |
| X100=   |                 | OR | X200=  |                 |
| +180=   |                 | OR | +360=  |                 |